



Docket No.: 0717-0488P  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

---

In re Patent Application of:  
Noriyuki KOYAMA

Application No.: 10/040,462

Confirmation No.: 002572

Filed: January 9, 2002

Art Unit: 2674

For: CHARACTER DISPLAY APPARATUS,  
CHARACTER DISPLAY METHOD, AND  
RECORDING MEDIUM

---

Examiner: D. Q. Dinh

**AMENDMENT AFTER FINAL ACTION (37 C.F.R. SECTION 1.116)**

MS AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

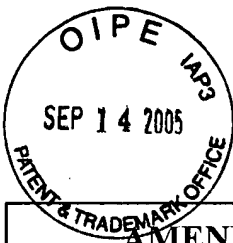
Sir:

**INTRODUCTORY COMMENTS**

In response to the Office Action dated June 14, 2005, please amend the above-identified U.S. patent application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 8 of this paper.



Corres. and Mail  
**BOX AF**

*STW*  
*AF*

MS AF  
REPLY UNDER 37 C.F.R. § 1.116  
EXPEDITED PROCEDURE  
EXAMINING GROUP

| AMENDMENT TRANSMITTAL LETTER   |                                  |                                |                             | Docket No.<br>0717-0488P         |      |
|--|----------------------------------|--------------------------------|-----------------------------|----------------------------------|------|
| Application No.<br>10/040,462-Conf. #002572  |                                  | Filing Date<br>January 9, 2002 |                             | Examiner<br>D. Q. Dinh           |      |
|  |                                  |                                |                             | Art Unit<br>2674                 |      |
| Applicant(s): Noriyuki KOYAMA  |                                  |                                |                             |                                  |      |
| Invention: CHARACTER DISPLAY APPARATUS, CHARACTER DISPLAY METHOD, AND RECORDING MEDIUM   |                                  |                                |                             |                                  |      |
| MS AF<br>Commissioner for Patents<br>P.O. Box 1450<br>Alexandria, VA 22313-1450  |                                  |                                |                             |                                  |      |
| Transmitted herewith is an amendment in the above-identified application.<br>The fee has been calculated and is transmitted as shown below.  |                                  |                                |                             |                                  |      |
| <b>CLAIMS AS AMENDED</b>   |                                  |                                |                             |                                  |      |
|  | Claims Remaining After Amendment | Highest Number Previously Paid | Number Extra Claims Present | Rate                             |      |
| Total Claims   | 7                                | - 20 =                         | 0                           | x                                |      |
| Independent Claims   | 7                                | - 9 =                          | 0                           | x                                |      |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/>   |                                  |                                |                             |                                  |      |
| Other fee (please specify):  |                                  |                                |                             |                                  |      |
| <b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>  |                                  |                                |                             |                                  | 0.00 |
| <input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity   |                                  |                                |                             |                                  |      |
| <input checked="" type="checkbox"/> No additional fee is required for this amendment.  |                                  |                                |                             |                                  |      |
| <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____.<br>A duplicate copy of this sheet is enclosed.   |                                  |                                |                             |                                  |      |
| <input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.  |                                  |                                |                             |                                  |      |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.  |                                  |                                |                             |                                  |      |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u><br>as described below. A duplicate copy of this sheet is enclosed. |                                  |                                |                             |                                  |      |
| <input checked="" type="checkbox"/> Credit any overpayment.  |                                  |                                |                             |                                  |      |
| <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.   |                                  |                                |                             |                                  |      |
| <i>Charles Gorenstein</i><br>Charles Gorenstein <i>STW #37,750</i><br>Attorney Reg. No.: 29,271  |                                  |                                |                             | Dated: <u>September 14, 2005</u> |      |
| BIRCH, STEWART, KOLASCH & BIRCH, LLP<br>8110 Gatehouse Rd<br>Suite 100 East<br>P.O. Box 747<br>Falls Church, Virginia 22040-0747<br>(703) 205-8000   |                                  |                                |                             |                                  |      |